

## QUARTERLY PROGRESS REPORT

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Program Year \_\_\_\_\_

Reporting Period Covered:   ☐ Jan-March   ☐ April-June   ☐ July-September   ☐ Oct-Dec

SUBRECIPIENT

\_\_\_\_\_

Address \_\_\_\_\_

Contact Person \_\_\_\_\_ Phone # \_\_\_\_\_

Project Name \_\_\_\_\_ Project # \_\_\_\_\_

### **PART I. ACTIVITY STATUS FOR QUARTER**

Progress Achieved in Accomplishing Project Goals and Objectives

*(Goals and objectives should correspond to the goals and objectives in the approved grant application). Indicate measurable units (e.g. # of clients served this reporting period, # of clients low and moderate income persons, or # of brochures distributed, etc.)*

#### **A. ACTIVITIES (Goals/Objectives)**

#1 \_\_\_\_\_  
Planned:

Actual:

#2 \_\_\_\_\_  
Planned:

Actual:

#### **B. DIFFICULTIES ENCOUNTERED**

*(As applicable, should include information on specific reasons why goals and objectives were not met)*

ACTIVITY \_\_\_\_\_

Problem(s):

Resolutions/Corrective Action Plan and Schedule:

#### **C. ACTIVITY ANTICIPATED NEXT REPORTING PERIOD**

*(Should correspond to the "Planned" entries under Progress Achieved in the next report)*

Goal/Objective 1:

Goal/Objective 2:

## PART II. QUARTERLY SERVICE STATISTICS

1. Number of all **NEW** persons served this quarter: \_\_\_\_\_  
*(NEW means never served and/or reported before)*

2. Income of **NEW** Clients Served this quarter:

a.	Number of Low & Moderate (L/M) Income Persons	
b.	Number of all Others (not low mod)	
c.	Total (should be same as #1 above)	
d.	Number of Low Income Persons <i>(Of the total L/M persons in item a, how many are low income?)</i>	
e.	Number of Extremely Low Income Persons <i>(Of the total L/M persons in item a, how many are extremely low income?)</i>	

3. Race/Ethnicity of **NEW** Clients this quarter:

	RACE # Total	Ethnicity # Hispanic
White		
Black/African American		
Asian		
American Indian/Alaskan Native		
Native Hawaiian/Other Pacific Islander		
American Indian/Alaskan Native & White		
Asian & White		
Black/African American & White		
Am. Indian/Alaskan Native & Black/African American		
Other Multi-Racial		
Asian/Pacific Islander		
Hispanic		
TOTAL		

4. Number of **NEW** Female Headed Households Served \_\_\_\_\_  
 5. Number of **NEW** Persons who are 62 or older \_\_\_\_\_  
 6. **Cumulative Number of Persons Served to Date** \_\_\_\_\_

Signature

Title

Date

### Year 2004 Income Limits

Family Size (persons)	Extremely Low Income (0%-30% of Median)	Low Income (0%-50% of Median)	Low/Mod Income (0%-80% of Median)	NOT LOW/MOD
1	\$0 - 10,850	\$0 - 18,050	\$0 - 28,900	28,901+
2	\$0 - 12,400	\$0 - 20,650	\$0 - 33,000	33,001+
3	\$0 - 13,950	\$0 - 23,200	\$0 - 37,150	37,151+
4	\$0 - 15,500	\$0 - 25,800	\$0 - 41,300	41,301+
5	\$0 - 16,700	\$0 - 27,850	\$0 - 44,600	44,601+
6	\$0 - 17,950	\$0 - 29,950	\$0 - 47,900	47,901+
7	\$0 - 19,200	\$0 - 32,000	\$0 - 51,200	51,201+
8	\$0 - 20,450	\$0 - 34,050	\$0 - 54,500	54,501+